UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D OTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR**

OMB APPROVAL OMB Number: 3235-0076

Expires: May 31, 2005

Estimated average burden hours per response

SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					
	1				

Name of Offering (☐ check if	this is an amendment and name	e has changed, and in	dicate change.)					
Series C Preferred Stock and Se	· · · · · · · · · · · · · · · · · · ·							
Filing Under (Check box(es) the	at apply): 🛭 Rule 504 🔲 Ri	ule 505 🗵 Rule 506	5 □ Section 4(6)	ULOE				
Type of Filing: ☑ New Filing								
		IC IDENTIFICATI	ON DATA					
1. Enter the information reques	ted about the issuer				- 04034931			
Name of Issuer (☐ check if the Digital Campaigns, Inc.	is is an amendment and name h	nas changed, and indi	cate change.)		04034331			
Address of Executive Offices 100 Hamilton Avenue, Suite 22		er and Street, City, St CA 94301	ate, Zip Code)	Telephone (650) 853-8	Number (Including Area Code) 8138			
Address of Principal Business C (if different from Executive Off	•	er and Street, City, St	ate, Zip Code)	Telephone (650) 853-8	Number (Including Area Code) 8139			
Brief Description of Business Campaign automation application	ons and solutions				ercsED			
Type of Business Organization ☐ corporation ☐ business trust	☐ limited partnership, alread☐ limited partnership, to be f		other (please sp	ecify):	PROCESSED			
Actual or Estimated Date of Inc	orporation or Organization:	Month 0 3	Year 0 0	☑ Actual □	THOMSON THOMSON FINANCIAL			
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) D E								

UNIFORM LIMITED OFFERING EXEMPTION

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02) 1 of 8



A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☑ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply ☐ Promoter ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Draper, Timothy Business or Residence Address (Number and Street, City, State, Zip Code) c/o Draper Fisher Jurvetson 400 Seaport Court, Suite 250, Redwood City, CA 94063 Check Box(es) that Apply ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) de Rezende, Paulo Business or Residence Address (Number and Street, City, State, Zip Code) c/o Zone Ventures Management Co., LLC 241 So. Figueroa Street, Suite 340, Los Angeles, CA 90012 Check Box(es) that Apply ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Cremin, David Business or Residence Address (Number and Street, City, State, Zip Code) c/o Zone Ventures Management Co., LLC 241 So. Figueroa Street, Suite 340, Los Angeles, CA 90012 ☐ Promoter Check Box(es) that Apply ☑Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Zone Venture Fund II, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 241 So. Figueroa Street, Suite 340, Los Angeles, CA 90012 Check Box(es) that Apply ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Kraus, Michelle Business or Residence Address (Number and Street, City, State, Zip Code) 100 Hamilton Avenue, Palo Alto, CA 94301 ☐ Executive Officer ☑ Beneficial Owner ☑ Director Check Box(es) that Apply ☐ Promoter ☐ General and/or Managing Partner Full Name (Last name first, if individual) Kumar, Amit Business or Residence Address (Number and Street, City, State, Zip Code) 100 Hamilton Avenue, Palo Alto, CA 94301 ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Check Box(es) that Apply ☐ Promoter Managing Partner Full Name (Last name first, if individual) Gloria C. Wahl Business or Residence Address (Number and Street, City, State, Zip Code) One Lagoon Drive, Suite 100, Redwood Shores, CA 94065

Check Box(es) that Apply	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner	
Full Name (Last name first, AltoTech Ventures, LLC	if individual)					
Business or Residence Address (Number and Street, City, State, Zip Code) One Lagoon Drive, Suite 100, Redwood Shores, CA 94065						

						B. I	NFORM	ATION A	ABOUT O	FFERIN	G				
-					,									Yes	No
1.	На	is the iss	suer sold								offering?	•		. 🗆	☑
_					er also in A			, ,	•						
2.	. W	hat is th	ie minin	num inves	stment tha	t will be a	ccepted fi	om any ir	ndividual?					\$ N	
3.	Do	es the o	ffering i	permit ioi	nt owners	hip of a si	ngle unit)						<u>Yes</u> ☑	No
4.			٠.			•	Ū						tly, any commission		
-	lis of	ted is ar	n associa ker or de	ated perso ealer. If	n or agent	t of a brok five (5) p	ter or deal persons to	ler register	red with th	ne SEC ar	id/or with	a state or	g. If a person to be states, list the name or dealer, you may	e ·	
Full N	Name	(Last n	ame first	, if individ	dual)										
Busin	ness (or Reside	ence Ado	iress (Nur	nber and S	treet, City	, State, Zip	Code)							
Name	e of A	Associate	ed Broke	r or Deale	r ·	<u>. — —. —. —</u>				. — — <u>.</u> —	 -		····		
States	s in \	Vhich Pe	erson Lis	ted Has S	olicited or	Intends to	Solicit Pu	rchasers							
					vidual State									□ All S	States
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[RI		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	Vame	(Last na	ame first	, if individ	lual)										
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		 -													
Name	of A	Associate	ed Broke	r or Deale	r										
States	in V	Vhich Pe	rson Lis	ted Has S	olicited or	Intends to	Solicit Pu	rchasers					··		
(Cl	heck	"All Sta	tes" or c	heck indiv	idual State	es)				••••••				□ All S	States
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[M	T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI		[SC]	[SD]	[TN] , if individ	[XT]	[UT]	[VT]	[VA] ———	[WA]	[WV]	[WI]	[WY]	[PR]		
uni	varre	(Last no	arrie mist,	, ii maivic	.uar)										
Busin	ess c	r Reside	nce Add	ress (Nun	nber and St	treet, City,	State, Zip	Code)							
Vame	of A	ssociate	d Broker	r or Deale	r										
States	in V	Vhich Pe	rson List	ted Has So	olicited or	Intends to	Solicit Pu	rchasers							
(Cł	neck	"All Sta	tes" or cl	heck indiv	idual State	es)								🗆 All S	States
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[IL] [M] [RI	T]	[IL] [NE] [SC]	[IA] [NV] [SD]	[NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]		

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \Box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Iffering Price	A	mount Already Sold
	Debt	\$		\$_	
	Equity	\$	2,375,000.00	\$	2,375,000.00
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	S	1,290,000.00	\$_	1,290,000.00
	Partnership Interests	\$	 	\$	
	Other (Specify))	\$		\$	
	Total	\$	3,665,000.00	\$	3,665,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
	•		Number Investors		Aggregate Ollar Amount of Purchases
	Accredited Investors		8	S	3,665,000.00
	Non-accredited Investors			s	
	Total (for filings under Rule 504 only)			s	
	Answer also in Appendix, Column 4, if filing under ULOE.			-	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part $C-Q$ uestion 1.				
	Type of offering		Type of Security	D	ollar Amount Sold
	Rule 505			\$	
	Regulation A			\$	
	Rule 504			\$	
	Total			\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs			\$	
	Legal Fees		Ø	s	40,000.00
	Accounting Fees			\$	·
	Engineering Fees			s	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify)			\$ _	
	Total			\$	40,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."..... 3,625,000.00 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Payments to Officers. Others Directors & Affiliates Salaries and fees..... Purchase of real estate..... Purchase, rental or leasing and installation of machinery and equipment....... Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)..... Repayment of indebtedness...... Working capital. \square 3,625,000.00 Other (specify): 3,625,000.00 Column Totals..... Total Payments Listed (column totals added)..... \square \$_3,625,000.00

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)
Digital Campaigns, Inc.

Name of Signer (Print or Type)
Michelle Kraus

Signature

Pt

Title of Signer
Chief Executive

De Michelle P. Kraus

Date June 23, 2004

Title of Signer (Print or Type)
Chief Executive Officer

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)